

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TT	1112	9/7/01
RESPONSE FORMALITY REVIEW	MTB	954	12/26/02

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	0
7	0
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	0
21	0
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	=
30	=
31	✓
32	✓
33	0
34	0
35	0
36	0
37	0
38	✓
39	✓
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42	0
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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12-26-02